



Deposit Account Statement

Requested Statement Month: Deposit Account Number:

April 2009 080380

Name:

HAMILTON BROOK SMITH & REYNOLDS

530 VIRGINIA ROAD LAURIE COHEN

> Street Address 1: Street Address 2:

Attention:

City:

State: Zib:

Country:

UNITED STATES P.O. BOX 9133 01742-9133 CONCORD

FEE

ATTORNEY DOCKET NBR

POSTING REF TXT

DATE SEQ

AMT

BAL

REDACTED

7/30/2009

Deposit Account Statement

 $https://ramps.uspto.gov/eram/Controller; jsessionid=0000 EGXO_LkmTc0GZaQXWD5 fFKa: 11g0uehq7.pdf$

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04/30 1 10813695 2376.2170-013 1814

\$140.00 \$52

\$52,996.24

https://ramps.uspto.gov/eram/Controller;jsessionid=0000EGXO_LkmTc0GZaQXWD5fFKa:11g0uehq7

\$49,210.24	
\$140.00	SUM OF END REPLENISH BALANCE
1814	SUM OF REPLENISI
2376.2170-013	SUM OF CHARGES
10813695	START BALANCE
04/30 2	

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7/30/2009